

Stop mistreating challenged people

I would be remiss if I did not write about a moving experience I had in May, which was observed as Mental Health Month. A colleague of mine and a well-respected advocate for the mentally ill in Rhode Island, Craig Stenning, director of the Mental Health and Retardation Hospital (MHRH), shared with me information on the history of the mentally disabled in the Ocean State. Please keep in mind that when you have spent as much time in the medical field as I, nothing really surprises you. Yet the report Craig gave me was so compelling that I could not finish it without finding myself ready to cry or becoming physically ill.

The report was published by the Rhode Island Historical Society in November 1981. It is Volume 40, Number 4. The report takes the reader through three centuries of the care given to the mentally disabled in Rhode Island and nationwide from 1650-1950. As far back as Roger Williams, the mentally disabled were placed in almshouses (poor houses). There really was no differentiating the mentally ill from the poor, the sick and the blind. Those dens of inequity gave no medical care, provided scant amounts of food and a multitude of abuse by their caregivers. The Rhode Island State Asylum for the Insane opened in November 1870 on the Howard Farm in Cranston.

Howard Asylum had



By Kathleen
Heren

been built for a capacity of 200 patients but always had no less than 282 patients. The atten-

**The quest
for dignity
...is just as
important
for the dis-
abled as it
is for any
human
being.**

dants amused themselves by towel strangling and rubber hose beating patients. Most patients succumbed to tuberculosis due to the overcrowding, and autopsies would reveal numerous fractures from physical abuse. Words like idiot, imbecile and feeble-minded were frequently used. Giving those poor souls the minimum amount of food was common practice. If the patient was deaf or blind, the food was strewn on the floor for the patient to lap up like an animal.

There is a bill in the General Assembly that

would rename the Department of Mental Health and Retardation as the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals. The bill is strongly supported by Director Stenning. I hope that when budget cuts are so easily considered for the mentally ill and disabled, someone will present the Historical Society's report to the legislators. Even now there are mentally ill people living in community settings being physically, mentally and sexually abused by the people who are given the responsibility to care for them; sometimes the abuse is committed by family members. In some instances, elderly residents with dementia are still being physically and chemically restrained. We, as family members, advocates and health care providers, must always be the champions of the mentally ill and disabled because they have no voice.

We can all learn from Director Stenning that the quest for dignity and an acceptable quality of life is just as important for the disabled as it is for any human being. To read the eye-opening report Rhode Island History Articles 1942-2007, Days of Darkness and Hope, go online to www.rihs.org/list1942-present.html.

Kathleen Heren is executive director of the Alliance for Better Long-Term Care. You can contact her at (401) 785-3340.